

# Major Donor and Independent Expenditure Committee Campaign Statement

(Government Code Sections 84200-84216.5)

MAJOR DONOR AND INDEPENDENT EXPENDITURE  
COMMITTEE STATEMENT

Type or print in ink.

☐ Amendment

SEE INSTRUCTIONS ON REVERSE

<b>Statement covers period</b> from <u>10/01/2017</u> through <u>12/31/2017</u>	<b>Date of election if applicable:</b> (Month, Day, Year) _____	Date Stamp	<b>CALIFORNIA FORM 461</b>
			1/6
			For Official Use Only

## 1. Name and Address Of Filer

### NAME OF FILER

(Include name(s) of all affiliated entities whose contributions are included in this statement.)  
Anthem Inc. and its Affiliated Companies

MAILING ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE

Sacramento CA 95814

### RESPONSIBLE OFFICER

(If filer is other than an individual)

Michael Prozio

AREA CODE/DAYTIME PHONE

## 2. Nature and Interests of Filer (Complete each applicable section.)

☐ A FILER THAT IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS

NAME OF EMPLOYER/BUSINESS

BUSINESS INTERESTS

ADDRESS OF EMPLOYER/BUSINESS

☒ A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS ENGAGED

Health

☐ A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS

☐ A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY

## 3. Summary

(Amounts may be rounded to whole dollars.)

- Expenditures and contributions (including loans) of \$100 or more made this period. (Part 5.) ..... \$ 62700.00
- Unitemized expenditures and contributions (including loans) under \$100 made this period..... \$ 0.00
- Total expenditures and contributions made this period. (Add Lines 1 + 2.) ..... **SUBTOTAL** \$ 62700.00
- Total expenditures and contributions made from prior statement. (Enter amount from Line 5 of last statement filed. If this is the first statement for the calendar year, enter zero.) ..... \$ 6137850.00
- Total expenditures and contributions (including loans) made since January 1 of the current calendar year. (Add Lines 3 + 4.).....**TOTAL** \$ 6200550.00

## 4. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/31/2018 By Michael Prozio  
DATE SIGNATURE OF INDIVIDUAL DONOR OR RESPONSIBLE OFFICER IF OTHER THAN AN INDIVIDUAL

# Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND  
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period from <u>10/01/2017</u>	<b>CALIFORNIA FORM 461</b>
through <u>12/31/2017</u>	
2/6	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anthem Inc. and its Affiliated Companies

## 5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
10/03/2017	Becerra for Attorney General 2018  Los Angeles CA 90017 ID: 1394091 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Xavier Becerra Attorney General Statewide  NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	3800.00	Calendar Year \$ <u>8500.00</u> Other \$ _____
10/03/2017	Becerra for Attorney General 2018  Los Angeles CA 90017 ID: 1394091 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Xavier Becerra Attorney General Statewide  NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1200.00	Calendar Year \$ <u>8500.00</u> Other \$ _____
10/03/2017	Heath Flora for Assembly 2018  Hilmar CA 95324 ID: 1392690 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Heath Flora State Assembly Person Assembly District  NO: 12 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	4000.00	Calendar Year \$ <u>4000.00</u> Other \$ _____
10/03/2017	O'Donnell for Assembly 2018  Long Beach CA 90807 ID: 1393597 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Patrick O'Donnell State Assembly Person Assembly District  NO: 70 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	4000.00	Calendar Year \$ <u>4000.00</u> Other \$ _____
<b>SUBTOTAL \$</b>						

# Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND  
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period from <u>10/01/2017</u>	<b>CALIFORNIA FORM 461</b>
through <u>12/31/2017</u>	
3/6	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anthem Inc. and its Affiliated Companies

## 5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
10/04/2017	Senator Anthony Cannella's 2014 Officeholder Account  Hilmar CA 95324 ID: 1377403 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Officeholder Account	Anthony Joseph Cannella State Senator Senate District  NO: 12 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1500.00	Calendar Year \$ <u>1500.00</u> Other \$ _____
10/20/2017	Mark Vargas for Assembly 2017  Sacramento CA 95815 ID: 1397902 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Debt Retirement - S2017	Mark Vargas State Assembly Person Assembly District  NO: 51 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	3000.00	Calendar Year \$ <u>3000.00</u> Other \$ _____
10/26/2017	Rob Bonta for Assembly 2018  Sacramento CA 95814 ID: 1392389 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Rob Bonta State Assembly Person Assembly District  NO: 18 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	4200.00	Calendar Year \$ <u>4200.00</u> Other \$ _____
12/14/2017	Blanca Rubio for Assembly 2018  Sacramento CA 95815 ID: 1393364 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Blanca Rubio State Assembly Person Assembly District  NO: 48 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2200.00	Calendar Year \$ <u>2200.00</u> Other \$ _____
<b>SUBTOTAL \$</b>						

# Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND  
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period from 10/01/2017 through 12/31/2017	<b>CALIFORNIA FORM 461</b>
	4/6

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anthem Inc. and its Affiliated Companies

## 5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
12/14/2017	Brian Dahle for Assembly 2018  Hilmar CA 95324 ID: 1393369 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Brian Dahle State Assembly Person Assembly District  NO: 01 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1900.00	Calendar Year \$ 4400.00 Other \$
12/14/2017	Connie M. Leyva for Senate 2018  Los Angeles CA 90017 ID: 1374053 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Connie M. Leyva State Senator Senate District  NO: 20 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2500.00	Calendar Year \$ 2500.00 Other \$
12/14/2017	Dr. Joaquin Arambula for Assembly 2018  Sacramento CA 95815 ID: 1393111 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Joaquin Arambula State Assembly Person Assembly District  NO: 31 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2200.00	Calendar Year \$ 2200.00 Other \$
12/14/2017	Ian Calderon for Assembly 2018  Sacramento CA 95814 ID: 1392684 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Ian Calderon State Assembly Person Assembly District  NO: 57 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2500.00	Calendar Year \$ 2500.00 Other \$
<b>SUBTOTAL \$</b>						

# Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND  
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period from 10/01/2017	<b>CALIFORNIA FORM 461</b>
through 12/31/2017	
5/6	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anthem Inc. and its Affiliated Companies

## 5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
12/14/2017	Jay Obernolte for Assembly 2018  Sacramento CA 95814 ID: 1392884 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Jay Obernolte State Assembly Person Assembly District  NO: 33 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2000.00	Calendar Year \$ 2000.00 Other \$
12/14/2017	Jim Wood for Assembly 2018  Healdsburg CA 95448 ID: 1392333 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		James D. Wood State Assembly Person Assembly District  NO: 02 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	4400.00	Calendar Year \$ 4400.00 Other \$
12/14/2017	Marc Steinorth for Assembly 2018  Alta Loma CA 91701 ID: 1392851 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Marc Steinorth State Assembly Person Assembly District  NO: 40 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2000.00	Calendar Year \$ 2000.00 Other \$
12/14/2017	Re-Elect Senator Atkins 2020  Encinitas CA 92024 ID: 1393189 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Toni G. Atkins State Senator Senate District  NO: 39 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	4400.00	Calendar Year \$ 4400.00 Other \$
SUBTOTAL \$						

# Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND  
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period from 10/01/2017	<b>CALIFORNIA FORM 461</b>
through 12/31/2017	
6/6	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anthem Inc. and its Affiliated Companies

## 5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
12/14/2017	Rodriguez for Assembly 2018  Sacramento CA 95814 ID: 1392709 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Freddie Rodriguez State Assembly Person Assembly District  NO: 52 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2500.00	Calendar Year \$ 2500.00 Other \$
12/15/2017	Taxpayers for Jim Nielsen - Senate 2018  Sacramento CA 95814 ID: 1373597 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Jim Nielsen State Senator Senate District  NO: 04 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2400.00	Calendar Year \$ 4400.00 Other \$
12/15/2017	Taxpayers for Jim Nielsen - Senate 2018  Sacramento CA 95814 ID: 1373597 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Jim Nielsen State Senator Senate District  NO: 04 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2000.00	Calendar Year \$ 4400.00 Other \$
12/18/2017	Californians for High Quality and Affordable Health Care PAC  Sacramento CA 95814 ID: 1379593 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Californians for High Quality and Affordable Health Care PAC Other -- Statewide General Purpose IE Committee  NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	10000.00	Calendar Year \$ 10000.00 Other \$
SUBTOTAL \$					62700.00	

FPPC Form 461 (8/99)  
For Technical Assistance: 916/322-5660